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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/699,713
	Filing Date	11/03/2003
	First Named Inventor	James R. Becker
	Art Unit	1732
	Examiner Name	
	Attorney Docket No.	ARS-103US (formerly P-3382.6)
Total Number of Pages in This Submission 3		

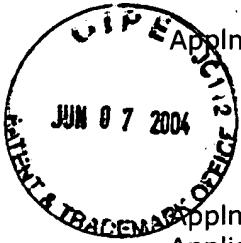
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Communication with Power of Attorney and Correspondence Address Indication Form <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<b>Remarks:</b>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual Name	Allan Ratner	Registration No. (Attorney/Agent)	19,717
Signature			
Date	June 2, 2004		

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			
Typed or printed name	Linda M. Keller		
Signature		Date	June 2, 2004

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Appln. No.: 10/699,713

ARS-103US  
(formerly P-3382.6)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No: 10/699,713  
Applicant: James R. Becker  
Filed: 11/03/2003  
Title: DRY ICE BLOCK EXTRUDER  
TC/A.U.: 1732  
Examiner:  
Confirmation No.:  
Docket No.: ARS-103US (formerly P-3382.6)

**COMMUNICATION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached is an executed Power of Attorney and Correspondence Address Indication Form. All future correspondence should now be directed to the attention of:

Allan Ratner  
RatnerPresita  
P.O. Box 980  
Valley Forge, PA 19482-0980  
Phone: 610-407-0700  
Fax: 610-407-0701

Respectfully submitted,

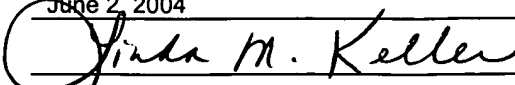
  
\_\_\_\_\_  
Allan Ratner, Reg. No. 19,717  
Attorney for Applicant

AR/lk  
Dated: June 2, 2004  
P.O. Box 980  
Valley Forge, PA 19482  
(610) 407-0700

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June 2, 2004

  
\_\_\_\_\_  
Linda M. Keller

**POWER OF ATTORNEY  
AND  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/699,713
Filing Date	November 3, 2003
First Named Inventor	James R. Becker
Title	Dry Ice Block Extruder
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

☒ Practitioners associated with the Customer Number:

23122

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number

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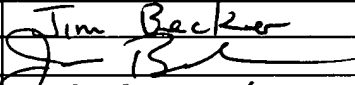
<input checked="" type="checkbox"/> Firm or Individual Name	Allan Ratner, RatnerPrestia				
Address	P.O. Box 980				
Address					
City	Valley Forge				
Country	U.S.A.	State	PA	Zip	19482-0980
Telephone	610-407-0700	Fax	610-407-0701		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Jim Becker		
Signature			
Date	5-20-04	Telephone	210 885-2094

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of one forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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